# DEPARTMENT OF SOCIAL AND HEALTH SERVICES MEDICAL ASSISTANCE ADMINISTRATION Olympia, Washington

To: Dental Providers Memorandum No. 02-96 MAA

Managed Care Plans Issued: January 15, 2003

Regional Administrators

CSO Administrators For Information Call:

1-800-562-6188

From: Douglas Porter, Assistant Secretary

Medical Assistance Administration

Subject: Vendor Rate Increase for Dental Anesthesia, New Procedure Codes Billable,

**And Corrections to November 2002 Dental Billing Instructions** 

Effective with dates of service on and after January 1, 2003, the Medical Assistance Administration (MAA) is implementing a vendor rate increase for dental anesthesia, as part of the targeted vendor rate increases authorized by the 2002 Legislature.

MAA is adding three new procedure codes for root canal retreatment, and publishing corrections to the Dental Billing Instructions, dated November 2002.

## **Anesthesia**

The new MAA payment for general anesthesia administered by a dentist is calculated as follows:

#### 101.15 + [TIME UNITS X 20.23] = MAXIMUM ALLOWABLE FEE

(Note: Every 15-minute increment or fraction thereof equals 1 time unit.)

### **Retreatment of Root Canals**

Effective with dates of service on and after January 1, 2003, the following procedure codes and rates apply to retreatment of root canals:

			Maximum Allowable	
Procedure Code	Description	Prior Authorization	0-18 yrs	19 yrs & up
D3346	Retreatment of previous root canal therapy - anterior	Yes	\$250.00	\$165.00
D3347	Retreatment of previous root canal therapy - bicuspid	Yes	\$270.00	\$200.00
D3348	Retreatment of previous root canal therapy - molar	Yes	\$290.00	\$220.00



**Note:** These three codes are not payable to the provider who did the initial root canal. The provider performing the above service(s) must submit pre-treatment and post-treatment x-rays to MAA.

## **Corrections to the November 2002 Billing Instructions:**

- **Page D8** (Coverage Section), second column add D9420 to list of ADA codes covered for GAU clients.
- **Page H27** (Dental Fee Schedule), for D5860 insert \$398.00 maximum allowable for kids and adults.
- Page I12 (Oral Surgery), last line change FS rate for procedure code 42281 to \$67.11.

Please bill your usual and customary charge. Payment will be the lesser of the billed amount or the maximum allowable fee.

To obtain this fee schedule electronically, go to MAA's website at <a href="http://maa.dshs.wa.gov">http://maa.dshs.wa.gov</a>. Click on Provider Publications/Fee Schedules link.